Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	01/28/2014	Address:	416 Hendricks
Incident #:	14ISPC000703		Anderson, Indiana
County:	Madison		
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			
☑ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only)		Residence Outbuilding Vehicle	Hotel/MotelOpen – No StructureOther:
 Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) ✓ One Pot or Birch Reaction(s): Basement, Outside Trash 			
Red Phosphorous/Iodine Reaction(s):			
Hydrochloric Acid Gas Generator(s): Basement, Outside Trash			
Flammable Solvents: <u>Basement, Outside Trash</u>			
Water Reactive Metal (Lithium): <u>Basement, Outside Trash</u>			
Anhydrous Ammonia:			
Corrosive Acid: <u>Basement, Outside Trash</u>			
Corrosive Base: <u>Basement, Outside Trash</u>			
Other (item and location):			
Vehicle Information:			
Owner: VIN: Year:		Make: Model:	
Yes No	age 18 discovered (check appropriate) (number present) not present but evidence they reside	unclean Estimated les occurring:	tions of home: clean disarray
This report l	has been faxed* or emailed to the fo	llowing agencies th	at serve the location:
Fire Department City, Township or County Anderson Fax: Email Health Department County: Madison Fax: Email Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Nate Raney Phone 765-778-2121			

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.